SCHEDULE E)	PAGE 1 OF 6 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C 000404007	
	C C00484287	
Check If Z 24-hour report 48-hour report New report Amends report file	ed on 09 02 2012	
Full Name (Last, First, Middle Initial) of Payee	Date	
COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION	M M / D D / Y Y Y Y	
Mailing Address 100 Indiana Avenue, N.W.	09	
, so malana mones, mm	Amount	
City State Zip Code	1125.05	
Washington DC 20001	1135.95 Transaction ID : D448072	
Purpose of Expenditure Category/ Odd	ffice Sought: House State:	
In Kind Staff Outgoin 7	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———	
	heck One: Support 🔀 Oppose	
	Schurzamant Faw M Drimary Canaval	
139987 24 201	sbursement For: Primary General	
for Office Sought	Other (specify)	
Full Name (Last, First, Middle Initial) of Payee	Date	
COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION	M M / D D / Y Y Y Y	
Mailing Address 100 Indiana Avenue, N.W.	09	
Too malana / Wondo, 11171	Amount	
City State Zip Code	1105.05	
Washington DC 20001	1135.95 Transaction ID : D448073	
Purpose of Expenditure Category/ Odd	ffice Sought: House State:	
In Kind Staff 001	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President ——	
	heck One: X Support Oppose	
Di		
130087 24 201	isbursement For: Primary General	
for Office Sought	Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	2271.90	
	4 4	
(b) SUBTOTAL of Unitemized Independent Expenditures		
·	7 7 7	
(c) TOTAL Independent Expenditures		
	7 7	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Me Elizabath H Shulan		
Ms. Elizabeth H Shuler [Electronically Filed] Date	10 18 2012	
Signature		

SCHEDULE E)	PAGE 2 OF 6 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C 200404207	
	C C00484287	
Check If Z 24-hour report 48-hour report New report Amends report file	ed on 09 02 / 2012	
Full Name (Last, First, Middle Initial) of Payee AFL-CIO	Date	
Mailing Address 815 Sixteenth Street, N.W.	09 / 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	Amount	
City State Zip Code Washington DC 20006-4101	270.80	
	Transaction ID : D448064	
Walk Packets	ffice Sought: House State:	
Type 004	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	X President	
Barack Obama Ch	neck One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	sbursement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee	Date	
AFL-CIÒ	M M / D D / Y Y Y Y	
Mailing Address 815 Sixteenth Street, N.W.	09 01 2012	
o o o o o o o o o o o o o o o o o o o	Amount	
City State Zip Code	73.82	
Washington DC 20006-4101	Transaction ID : D448065	
Purpose of Expenditure Walk Packets Category/ Type Of Of	ffice Sought: House State:	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
	neck One: Support X Oppose	
, n	Schours are at Fau. M. Duine are	
Calendar Year-To-Date Per Election for Office Sought	sbursement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	344.62	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Ms. Elizabeth H Shuler [Electronically Filed] Date	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature	.0 2012	

(SCHEDULE E)	PAGE 3 OF 6 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If X 24-hour report 48-hour report New report X Amends report	rt filed on 09 02 2012	
Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)	Date	
Mailing Address 1325 Massachusetts Ave. NW	M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
01.1. 7. 0.4.	Amount	
City State Zip Code Washington DC 20005	103.58	
	Transaction ID : D448068	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	X President	
Barack Obama	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)	Date 09 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 1325 Massachusetts Ave. NW	Amount	
City State Zip Code		
Washington DC 20005	103.58	
Purpose of Expenditure Category/ Type 001	Office Sought: House State: Senate District: 49	
	President District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	207.16	
(b) SUBTOTAL of Unitemized Independent Expenditures	>	
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Ms. Elizabeth H Shuler [Electronically Filed] Date	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature		

(SCHEDULE E)	PAGE 4 OF 6 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
	G 00484287
Check If X 24-hour report 48-hour report New report X Amends repo	ort filed on 09 / 02 / 2012
Full Name (Last, First, Middle Initial) of Payee	Date
Mosaic	M M / D D / Y Y Y
Mailing Address 4801 Viewpoint Place	09 01 2012
4001 Viewpolitt Flace	Amount
City State Zip Code	0510.50
Cheverly MD 20781	2542.50
Purpose of Expenditure Category/	Transaction ID : D448062 Office Sought: House State:
Fliers Odlegory 004	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Willard Mitt Romney	Check One: Support Oppose
	Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought	2012
S .	Other (specify)
Full Name (Last, First, Middle Initial) of Payee Mosaic	Date
Wosaic	09 01 2012
Mailing Address 4801 Viewpoint Place	00 01 2012
	Amount
City State Zip Code	2092.50
Cheverly MD 20781	Transaction ID : D448063
Purpose of Expenditure Fliers Category/ 004	Office Sought: House State:
Type 004	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President Occupation
Barack Obama	Check One: Support Oppose
Calendar Year-To-Date Per Election	Disbursement For: Primary General
for Office Sought	2012 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	4635.00
(a) SOBIOTAL OF HEIRIZEG INGOPERIGER EXPENDICIONS	4033.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(S) GOD TO THE OF OTHER MESOPERISON Experiences minimum minimum minimum managements and the contract of the co	7 7
(c) TOTAL Independent Expenditures	
(-,	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent o party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler	M = M / D = D / Y = Y = Y
[Electronically Filed] Date	
Signature	

SCHEDULE E)	PAGE 5 OF 6 FOR SE OF FORM 24/48	
	EC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If \times 24-hour report 48-hour report New report \times Amends report filed on 09		
Full Name (Last, First, Middle Initial) of Payee		
Plasterers' Cement Masons' & Shop Hands Political Action Committee	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 11720 Beltsville Drive #700 Amount		
City State Zip Code		
Beltsville MD 20705	321.82 tion ID : D448066	
Purpose of Expenditure Category/ Office Sought		
lype	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney Check One:	President Support Oppose	
White terminary		
139987 24 2012	er (specify)	
Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee		
	9 01 2012	
Amount	ı	
City State Zip Code	321.82	
	tion ID : D448067	
Purpose of Expenditure In Kind Staff Category/ Type O01 Office Sought	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	Y President	
Barack Obama Check One:	Support Oppose	
139987.24 2012	er (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	643.64	
	7 1 7 1 7 1	
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7	
(c) TOTAL Independent Expenditures	7 7 7	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	18 2012	
Signature		

SCHEDULE E)	PAGE 6 OF 6 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If X 24-hour report 48-hour report New report X Amends report filed of	on 09 / 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Full Name (Last, First, Middle Initial) of Payee		
AFSCME Special Account	Date M	
Mailing Address 1625 L Street, NW	Amount	
City State Zip Code		
Washington DC 20036	1551.18 ransaction ID : D448070	
Purpose of Expenditure Category/ Office	Sought: House State:	
In Kind Staff 001 Type 001	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President Once	
Barack Obama Check	One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought 139987.24 Disbur 2012	rsement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee	Date	
AFSCME Special Account	M M / D D / Y Y Y Y	
Mailing Address 1625 L Street, NW	09 01 2012	
	Amount	
City State Zip Code	1551.18	
	ransaction ID : D448071	
Purpose of Expenditure In Kind Staff Category/ Type Office	Sought: House State: Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———	
Willard Mitt Romney Check	One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought 139987.24 Disbut 2012	rsement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	3102.36	
	7 7 7	
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7	
(c) TOTAL Independent Expenditures	11204.68	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Ms. Elizabeth H Shuler [Electronically Filed] Date 10	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature		